

L16000179394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

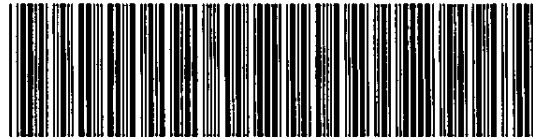
(Business Entity Name)

(Document Number)

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2017 JAN 26 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

JAN 30 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bar M Ranch LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michelle Martin Scheuermann

Name of Person

Bar M Ranch LLC

Firm/Company

P.O. Box 31

Address

Fountain, FL 32438

City/State and Zip Code

Bar M Ranch@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Martin Scheuermann

Name of Person

at (850) 688-5670

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Bar M Ranch LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on Sept. 26, 2016 and assigned
Florida document number L16000179394.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Michelle Martin Scheuermann

New Registered Office Address:

19241 Ross Rd.

Enter Florida street address

Fountain

City

Florida

32438

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Michael Burks	18537 Gowan Rd.	<input type="checkbox"/> Add
		Fountain FL 32438	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Paige M. Dye	95 Forest Cir. N.	<input type="checkbox"/> Add
		Havana FL 3243	<input checked="" type="checkbox"/> Remove
		32333	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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2011 JUN 26 PM 11:40
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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Status / Registration of Bar M Ranch LLC
should be listed as an individual
owned / operated LLC with Michelle M
Martin Scheuermann as the only
individual.

Correction
NO
middle
initial
M.M.S.

The IRS assigned the Employer
Identification number: 61-1805298
to Bar M Ranch LLC as of
10-28-2016 under the name of
Michelle Martin Scheuermann - MBR
including a copy of that document

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AM 11:40
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TALLAHASSEE, FLORIDA

Item B was filled in to account for a
correction so that my full name listed
matches the EIN documents with the IRS

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated Monday January 23, 2017

Michelle Martin Scheuermann
Signature of a member or authorized representative of a member

Michelle Martin Scheuermann
Typed or printed name of signee